

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: POSITIONING SYSTEM FOR AN
APPLICATOR AND POSITIONING METHOD
FOR AN APPLICATOR

Attorney Docket Number:: 011350-335

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 8

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Hiroshi

Middle Name::

Family Name:: SHIONO

Name Suffix::

City of Residence:: Ashigarakami-gun

State or Province of Residence:: Kanagawa

Country of Residence:: Japan

Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1500, Inokuchi,
Nakai-machi

City of Mailing Address:: Ashigarakami-gun

State or Province of Mailing Address:: Kanagawa

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 259-0151

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Akira

Middle Name::

Family Name:: SAKAGUCHI

Name Suffix::

City of Residence:: Ashigarakami-gun

State or Province of Residence:: Kanagawa

Country of Residence:: Japan

Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1500, Inokuchi,
Nakai-machi

City of Mailing Address:: Ashigarakami-gun

State or Province of Mailing Address:: Kanagawa

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 259-0151

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Shin
Middle Name::
Family Name:: MAKI
Name Suffix::
City of Residence:: Ashigarakami-gun
State or Province of Residence:: Kanagawa
Country of Residence:: Japan
Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1500, Inokuchi,
Nakai-machi
City of Mailing Address:: Ashigarakami-gun
State or Province of Mailing Address:: Kanagawa
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing
Address:: 259-0151

Correspondence Information

Correspondence Customer Number:: 21839
Phone Number:: (703) 836-6620
Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing
Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Japan	2003-087932	03/27/03	Yes

Assignee Information

Assignee Name:: TERUMO KABUSHIKI KAISHA

Street of Mailing Address:: 44-1, Hatagaya 2-chome

City of Mailing Address:: Shibuya-ku

State or Province of Mailing Address:: Tokyo

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing
Address:: 151-0072